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#7/B
W. Lawson
12/20/03FACSIMILE COVER LETTER

To: EXAMINER ANDY S. RAO
Firm: PTO
Art Unit: 2613
Fax No. (703) 872-9306
From: Damon A. Treidler
Date: December 18, 2003
Re: USSN 09/699,209
OUR REF: 450100-02802
No. of Pages: 15
(including cover page)

Best Available Copy

If you do not receive all pages or are unable to read the transmission, please call and ask for Carol Ann Rossitto (a) ext. 2023.

In response to your communication mailed December 8, 2003, attached is a copy of the executed Amendment that was filed in the USPTO on September 16, 2003.

CONFIDENTIALITY NOTICE

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00164897

PATENT
450100-02802IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Takefumi Nagumo et al.
 Serial No. : 09/699,209
 Filed : October 27, 2000
 For : SIGNAL PROCESSING DEVICE, SIGNAL PROCESSING
 METHOD, DECODING DEVICE, DECODING METHOD AND
 RECORDING MEDIUM
 Examiner : Rao, Anand Shashikant
 Art Unit : 2613

745 Fifth Avenue
 New York, NY 10151
 Tel: 212-588-0800

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ No additional fee is required.
☒ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	28	Minus	** = 20	* 8 x	\$18 (9)	= \$ 144.00
Independent claims	6	Minus	*** = 6	* 0 x	\$24 (42)	= \$ 0
Total additional fee for this amendment						\$ 144.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$280(140) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the _____ month following the expiration of the term originally set therefor. This is a petition to request a _____ month extension of time. A check covering the cost of the petition is enclosed.
- ☒ A check in the amount of \$144.00 is attached, which covers the cost of ☒ additional claims _____ petition for extension of time.
- ☐ Charge \$_____ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on September 12, 2003.

Gordon M. Kessler, Reg. No. 38,511

Name of Applicant, Assignee or Registered Representative

Gordon M. Kessler
 Signature
 September 12, 2003
 Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicants

By:

Gordon M. Kessler
 Gordon M. Kessler
 Reg. No. 38,511
 Tel: 212-588-0800

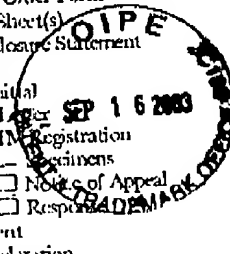
Serial No. 09/699,209 File No. 450100-02802 By EK/DAT
 Title In the Matter of the Application of T. Nagumo et al.
 The following due 9/24/03 in the U.S. Patent Office, was received in the Patent Office

<input type="checkbox"/> Affidavit	<input type="checkbox"/> Declaration	<input type="checkbox"/> Express Mail Mailing Certificate (separate sheet)
<input checked="" type="checkbox"/> Amendment		<input checked="" type="checkbox"/> Check No. <u>028165</u> for \$ <u>144.00</u>
<input type="checkbox"/> Preliminary Amendment		<input type="checkbox"/> Deposit Account Order Form
<input type="checkbox"/> Amendment After Final Rejection		<input type="checkbox"/> Drawing _____ Sheet(s)
<input type="checkbox"/> Request for Extension of Time		<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Provisional Patent Application		<input type="checkbox"/> PTO Form 1449
<input type="checkbox"/> Application for Patent, including _____ Pages Specification _____ Claims		<input checked="" type="checkbox"/> Low -Fee Transmittal
<input type="checkbox"/> Declaration <input type="checkbox"/> Oath <input type="checkbox"/> Power		<input type="checkbox"/> Brief <input type="checkbox"/> Letter
<input type="checkbox"/> Request for Filing Continuation or Divisional Application _____ sheets, in duplicate		<input type="checkbox"/> Application for TM Registration Including _____ Specimens
<input type="checkbox"/> File Wrapper Continuation Patent Application _____ sheets, in duplicate		<input type="checkbox"/> Status Request <input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> PCT Request _____ sheets, including		<input type="checkbox"/> Petition <input type="checkbox"/> Response
<input type="checkbox"/> Transmittal Letter to the US/RO		<input type="checkbox"/> Priority Document
<input type="checkbox"/> Assignment <input type="checkbox"/> Recordation Cover Sheet		<input type="checkbox"/> Small Entity Declaration

Mailed 1st class: 9/12/03

Serial No. 09/699,209 File No. 450100-02802 By EK/DAT
 Title In the Matter of the Application of T. Nagumo et al.
 The following due 9/24/03 in the U.S. Patent Office, was received in the Patent Office

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<input checked="" type="checkbox"/> Amendment		<input checked="" type="checkbox"/> Check No. <u>028165</u> for \$ <u>144.00</u>
<input type="checkbox"/> Preliminary Amendment		<input type="checkbox"/> Deposit Account Order Form
<input type="checkbox"/> Amendment After Final Rejection		<input type="checkbox"/> Drawing _____ Sheet(s)
<input type="checkbox"/> Request for Extension of Time		<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Provisional Patent Application		<input type="checkbox"/> PTO Form 1449
<input type="checkbox"/> Application for Patent, including _____ Pages Specification _____ Claims		<input checked="" type="checkbox"/> Low -Fee Transmittal
<input type="checkbox"/> Declaration <input type="checkbox"/> Oath <input type="checkbox"/> Power		<input type="checkbox"/> Brief <input type="checkbox"/> Letter
<input type="checkbox"/> Request for Filing Continuation or Divisional Application _____ sheets, in duplicate		<input type="checkbox"/> Application for TM Registration Including _____ Specimens
<input type="checkbox"/> File Wrapper Continuation Patent Application _____ sheets, in duplicate		<input type="checkbox"/> Status Request <input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> PCT Request _____ sheets, including		<input type="checkbox"/> Petition <input type="checkbox"/> Response
<input type="checkbox"/> Transmittal Letter to the US/RO		<input type="checkbox"/> Priority Document
<input type="checkbox"/> Assignment <input type="checkbox"/> Recordation Cover Sheet		<input type="checkbox"/> Small Entity Declaration



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FROMMER LAWRENCE & HAUG LLP

745 FIFTH AVENUE
NEW YORK, NY 10013

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Sept 12 2003

1-1-210 428

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Golden, Fuller

⑈028165⑈

⑈021000089⑈

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FROMMER LAWRENCE & HAUG LLP

DETACH AND RETAIN THIS STATEMENT

THE ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW.
IF NOT CORRECT PLEASE NOTIFY US PROMPTLY. NO RECEIPT DESIRED.

APPLICANT <i>Takefume Naguma et al</i>	
SERIAL NO. <i>091629, 209</i>	FL & H DOCKET NO. <i>450100-02802</i>
TITLE <i>Signal Processing Device, Signal Processing Method, Recording Device, Recording Method & Recording Medium</i>	
<input type="checkbox"/> APPEAL BRIEF	<input type="checkbox"/> PETITION FEE
<input type="checkbox"/> APPEAL FEE	<input type="checkbox"/> PETITION FOR CANCELLATION
<input type="checkbox"/> CERTIFICATE OF CORRECTION	<input type="checkbox"/> PETITION TO REVIVE
<input type="checkbox"/> DISCLAIMER	<input type="checkbox"/> RECORDING FEE
<input type="checkbox"/> EXTENSION OF TIME	<input type="checkbox"/> REQUEST FOR ORAL HEARING
<input checked="" type="checkbox"/> FEE FOR ADDED CLAIMS	<input type="checkbox"/> SEC. 8 TM DECLARATION FEE
<input type="checkbox"/> FILING FEE	<input type="checkbox"/> STATEMENT OF USE
<input type="checkbox"/> ISSUE FEE	<input type="checkbox"/> TM RENEWAL
<input type="checkbox"/> MAINTENANCE FEE	<input type="checkbox"/>
<input type="checkbox"/> MISSING PARTS	<input type="checkbox"/>
<input type="checkbox"/> NOTICE OF OPPOSITION	<input type="checkbox"/>
<input checked="" type="checkbox"/> PLEASE CHARGE ANY ADDITIONAL FEES OR CREDIT OVER PAYMENT TO DEPOSIT ACCOUNT NO. 50 0320	

144.00

CHARGE TO

NAME OF CLIENT OR ACCOUNT	FILE NO.	ATTORNEY	AMOUNT
<i>Sony</i>	<i>450100-02802</i>	<i>Gmk / DAT</i>	<i>144.00</i>